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COMMISSION ON QUALITY OF CARE
FOR THE MENTALLY DISABLED
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COMMISSIONERS

September 26, 1994

Charles Robinson
372 Blake Avenue
Apartment 11B
Brooklyn, New York 11212

Dear Mr. Robinson:

As you know, you requested that the Commission review the care and treatment that you received during your March 1, 1993 - March 29, 1993 hospitalization at Gracie Square Hospital (GSH). Specifically, you indicated that on the day that you were discharged from GSH you were told that you had borderline anemia and should follow-up with your doctor. You indicated that this was the first time that any person at GSH had indicated that you had abnormal blood tests. You stated that one week later (on April 5, 1993) you required emergency hospitalization and blood transfusions (your Hgb was 3.7), because of severe anemia.

In response to this complaint, I requested and reviewed the medical record generated during your hospitalization at GSH and I spoke with several community physicians who have been involved with your care. Additionally, your care was reviewed by a physician on the Commission's Medical Review Board. My review indicated that, at the insistence of your employer, you presented for admission to GSH because of a positive urine drug screen for cocaine which was later proved to be in error.

On March 2, 1993, admission blood tests were obtained and they were significantly abnormal (Rbc 2.14, Hgb 7.4, Hct 21.9, Platelet count 623). On March 3 a physician documented that the laboratory reported an anemia and that the you were asymptomatic. (You indicated that during your hospitalization you complained of shortness of breathe and weakness. These complaints were not reflected in the clinical record. Additionally, there is no indication in the clinical record that, prior to March 26, you were informed of your abnormal blood test, or that the physician attempted to elicit additional clinical information from you.) The physician indicated that a rectal exam would be done (there is no evidence that this occurred), stool samples would be tested

for the presence of blood, and repeat blood tests would be obtained. The physician ordered a complete blood count and three stools samples to be collected for testing.

On March 4 a repeat complete blood count was obtained and was again significantly abnormal (Rbc 2.14, Hgb 7.10, Hct 22.0, Platelet count 679.0). The hospital record does not contain any evidence that a stool sample was obtained or tested, and you indicated that you were never instructed to save your stools for testing. A nurse's note dated March 12 indicates that your laboratory results reflected an anemia and that it is was being followed.

My review and the review by the Medical Review Board physician indicate that your blood values were significantly abnormal and warranted more careful medical attention and follow-up. Additionally, my review indicated that although stool samples for testing were ordered, nursing staff failed to obtain them. In conclusion, we believe that both nursing and medical staff failed to provide adequate medical care to you. The Commission has written to GSH and asked them to review this case and take corrective action. I will monitor their response to this recommendation. I hope that this has been helpful to you. If you have questions, please call me at 1-800-624-4143.

Sincerely,

Kathy Serino

Kathy Serino, R.N.
Mental Hygiene Facility
Review Specialist
Quality Assurance Bureau

Charles Robinson